

Variation/Suspension of Periodical Payment Authority



QPCU Limited T/A QBANK
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ABN 79 087 651 036 AFSL No. 241413

Member Details

Name/s				Authority No.	
Address				Membership No.	
Telephone: (Work)		(Home)		(Mobile)	
Email					

Variation to Existing Authority

Existing Amount	\$	Payee				Authority No.	
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Please make variations to my/our existing authority as follows (complete relevant section/s below).

A Next due / / until Final Payment Date / / OR Until Further Notice
then: Weekly Fortnightly Monthly Four Weekly Quarterly Half Yearly Yearly

B Pay the amount of dollars cents \$

C Change account debited from S Account to S Account.

D Change QBANK Credit Card payment to Whole Monthly Outstanding Balance OR Minimum Monthly Balance

E Payment to a QBANK Account
Name Membership No. Account Type: S L

OR Direct Payment to a third party or to an account not held with QBANK:
Payee
Address
Account No. Reference
Financial Institution Branch BSB No.

Suspension of Authority

Payee				Authority No.	
Account Number		Reference			

Select ONE of the following options

Please do not send the periodical payments on the following dates: / / / / /
 Suspend payment from / / then recommence payments on / /

Authority

I/We acknowledge that I/we have read and understood QBANK's General Information Terms & Conditions Booklet including the QBANK Privacy Notice, and agree and consent to the collection, use and disclosure of personal information in this document for the purpose of the application and authority. This Notice must be read by each individual who signs this application form, including any guarantor or nominated account signatory.

By signing this application form you agree to the terms and conditions outlined in the document.

First Member Signature	Second Member Signature	Date

OFFICE USE ONLY

Loaded by	Date	Checked by	Date